

# UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

For New Members, Candidates, and New Employees

FORM B

Name: Brenda J. Hayes Daytime Telephone \_\_\_\_\_

## FILER STATUS



New Member of or Candidate for U.S. House of Representatives  
State: MICHIGAN  
District: 13th  
Candidates - Date of Election: 8/17/18



Check if Amendment



New Officer or Employee  
Employing Office: \_\_\_\_\_  
Staff Filer Type (If Applicable):  
Shared ☐ Principal Assistant ☐

Period Covered: January 1, \_\_\_\_\_ to \_\_\_\_\_

LEGISLATIVE RESOURCE CENTER

18 AUG - 1 AM 10:26

OFFICE OF THE CLERK  
U.S. HOUSE OF REPRESENTATIVES  
(Office Use Only)

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

## PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:

- a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or  
b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?

Yes ☒ No ☐

E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?

Yes ☐ No ☒

C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?

Yes ☒ No ☐

F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?

Yes ☐ No ☒

D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?

Yes ☐ No ☒

J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?

Yes ☐ No ☒

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

## EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

Yes ☐ No ☒

EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes ☐ No ☒



Filing ID #10020782

# FINANCIAL DISCLOSURE REPORT

---

 Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515
 

---

## FILER INFORMATION

**Name:** Brenda Jones  
**Status:** Congressional Candidate  
**State/District:** MI13

## FILING INFORMATION

**Filing Type:** Candidate Report  
**Filing Year:** 2018  
**Filing Date:**

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type (s)	Income Current Year to Filing	Income Preceding Year
City of Detroit [DB]		Undetermined	None		
first Independence Bank [BA]		\$1 - \$1,000	Interest	\$201 - \$1,000	None
hallmark k 401k [PE]		Undetermined	None		
hallmark 401k => vanguard fund [MF]		\$1,001 - \$15,000	Tax-Deferred		

\* Asset class details available at the bottom of this form. For the complete list of asset type abbreviations, please visit  
<https://fd.house.gov/reference/asset-type-codes.aspx>.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
city of detroit common council	Salary	\$31,768.00	\$81,219.00
City of Detroit	Salary	N/A	N/A
hallmark 401k		N/A	N/A

Source	Type	Amount Current Year to Filing	Amount Preceding Year
--------	------	-------------------------------------	--------------------------

**SCHEDULE D: LIABILITIES**

None disclosed.

**SCHEDULE E: POSITIONS**

None disclosed.

**SCHEDULE F: AGREEMENTS**

None disclosed.

**SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE**

None disclosed.

**SCHEDULE A ASSET CLASS DETAILS**

- hallmark 401k

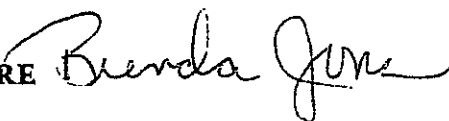
**EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION**

**Trusts:** Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

**Exemption:** Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

**COMMENTS****CERTIFICATION AND SIGNATURE**

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.